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Image# 14978186339

FEC FORM 3

FE5AN018

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3 For An Authorized Committee							Office Use Only				
1. NAME OF COMMITTEE (in		TYPE OR PRINT	•		ample: If typi er the lines.	ng, type	12	FE4M5			
Henry Lawren	ce for Co	ngress									
	1 1 1 1		1 1 1	1 1		1 1 1	1 1 1	1 1 1	1 1	1 1 1 1	I
ADDRESS (number ar	nd street)	2110 2nd Avenu	ue, East								
Check if di than previo reported. (A	usly	Palmetto					FL		34221 		
2. FEC IDENTIFIC	CATION NU	MBER ▼		OITY A			STATE	A		ZIP CODE STATE ▼	DISTRICT
C C005554	82		3. IS RE	THIS PORT	× NEV	W OR		AMENDI (A)	ED	FL	16
		ı									
4. TYPE OF RE	•	ose One)	(b) 12-l	Day PRE	-Election Rep	ort for the	e:				
(a) Quarterly R	leports:			П	Primary (12)		General (12	2G)	Rune	off (12R)
April 18	5 Quarterly R	eport (Q1)		H			$\overline{}$				··· (·=··)
July 15	Quarterly Re	eport (Q2)		ш	Convention	(12C)	L S	pecial (12	!S)		
		y Report (Q3)	Ele	ction on	M M	/ D D	/ Y	Y Y Y		in the State of	
Januar	y 31 Year-End	Report (YE)	(c) 30-I	Day POS	T -Election Re	port for th	ne:				
					General (30	G)	R	lunoff (301	R)	Spec	cial (30S)
Termina	ation Report (TER)	Ele	ection on	M = M	/ D D	/ Y	Y Y Y		in the State of	
5. Covering Period	M N 08	/ D D /	Y Y 2014		through	M 0		30)14	
I certify that I have e	examined this	s Report and to	the best	of my kn	owledge and	belief it is	s true, co	rrect and	compl	lete.	
Type or Print Name	of Treasurer	Curtis Root									
Signature of Treasure	er <i>Curti</i> s	s Root			[Electronically	Filed]	Date	10 M	/ D		9 9 9 2014
NOTE: Submission of	false, errone	ous, or incomplet	e informa	tion may	subject the pe	erson signir	ng this Re	port to the	e pena	Ities of 2 U.S.	C. §437g.
Office										0 50014	
Use Only										C FORM evised 02/2003	

SUMMARY PAGE

FEC Form 3 (Revised 02/2003) of Receipts and Disbursements

PAGE 2 / 21

Write or Type Committee Name

Henry Lawrence for Congress

09 30 2014 07 2014 Report Covering the Period: From: To: **COLUMN A COLUMN B Election Cycle-to-Date** This Period Net Contributions (other than loans) **Total Contributions** (a) 9059.00 3519.00 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) (c) Net Contributions (other than loans) 9059.00 3519.00 (subtract Line 6(b) from Line 6(a)) Net Operating Expenditures (a) Total Operating Expenditures 7917.81 16846.34 (from Line 17) (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 7917.81 16846.34 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 1426.48 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 25400.00 Schedule C and/or Schedule D).....

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 21

Write or Type Committee Name

Henry Lawrence for Congress

	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11.	CONTRIBUTIONS (other than loans) FROM:		
	(a) Individuals/Persons Other Than		
	Political Committees (i) Itemized (use Schedule A)	5400.00	1750.00
	(ii) Unitemized	3634.00	1769.00
	(iii) TOTAL of contributions from individuals	9034.00	3519.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) The Candidate	25.00	0.00
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	9059.00	3519.00
2.	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13	LOANS:		
0.	(a) Made or Guaranteed by the Candidate	0.00	11000.00
	(b) All Other Loans	0.00	2500.00
	(c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	13500.00
4.	OFFSETS TO OPERATING		
	EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
5.	OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
6.	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	9059.00	17019.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003)

ursements

PAGE 4 / 21

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	7917.81	16846.34
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19.	LOAN REPAYMENTS:		
	(a) Of Loans Made or Guaranteed by the Candidate	0.00	0.00
	(b) Of All Other Loans	0.00	0.00
	(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	0.00
20.	REFUNDS OF CONTRIBUTIONS TO:		
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00
21.	OTHER DISBURSEMENTS	0.00	0.00
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	7917.81	16846.34
	III. CASH SU	JMMARY	
23.	CASH ON HAND AT BEGINNING OF REPOR	RTING PERIOD	285.29
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	9059.00
25.	SUBTOTAL (add Line 23 and Line 24)		9344.29
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	m Line 22)	7917.81
27.	CASH ON HAND AT CLOSE OF REPORTING (subtract Line 26 from Line 25)		1426.48

SCHEDULE A (FEC Form 3)

FOR LINE NUMBER: **PAGE** 5 OF Use separate schedule(s) (check only one) 11a 11b 11d 11c 12

21

for each category of the ITEMIZED RECEIPTS Detailed Summary Page 13a 13b 14 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Henry Lawrence for Congress Full Name (Last, First, Middle Initial) Robert Butera Date of Receipt Mailing Address 6916 14th Street, West 2014 29 City State Zip Code Transaction ID: SA11AI.4523 FL 34207 Bradenton FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 1000.00 Name of Employer Occupation Self-employed Restaurant owner Receipt For: 2014 Election Cycle-to-Date Primary X General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) Eric Condren Date of Receipt Mailing Address 3603 61st Drive, East 11 2014 Citv State Zip Code Transaction ID: SA11AI.4415 Bradenton FL 34203 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation Retired Retired Receipt For: 2014 Election Cycle-to-Date M General Primary 250.00 Other (specify) Full Name (Last, First, Middle Initial) Herman Gilbert Date of Receipt Mailing Address 4746 Balboa Park Loop 2014 29 City State Zip Code Transaction ID: SA11AI.4524 FL Bradenton 34211 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 300.00 Name of Employer Occupation Retired Retired Receipt For: 2014 Election Cycle-to-Date X General Primary 300.00 Other (specify) 1550.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

FOR LINE NUMBER: **PAGE** 6 OF 21 (check only one) 11a 11b 11c 11d Detailed Summary Page 12 13a 13b

Use separate schedule(s) for each category of the Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Henry Lawrence for Congress Full Name (Last, First, Middle Initial) Judith Keenan Date of Receipt Mailing Address 1107 Gulf Drive, North 2014 11 City State Zip Code Transaction ID: SA11AI.4414 FL 34217 **Bradenton Beach** FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 500.00 Name of Employer Occupation Retired Retired Receipt For: 2014 Election Cycle-to-Date Primary X General 500.00 Other (specify) Full Name (Last, First, Middle Initial) Ms Samantha Keller Date of Receipt Mailing Address 7432 Sunshine Skyway Lane, South, 07 2014 City State Zip Code Transaction ID: SA11AI.4397 St. Petersburg FL 33711 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation Retired Retired Receipt For: 2014 Election Cycle-to-Date M General Primary 250.00 Other (specify) Full Name (Last, First, Middle Initial) Dr. Randall Morgan Date of Receipt Mailing Address 7913 Rio Bella Place 2014 07 City State Zip Code Transaction ID: SA11AI.4400 FL University Park 34201 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation Sarasota Orthopedic Associates Physician Receipt For: 2014 Election Cycle-to-Date Primary General 250.00 Other (specify) 1000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:			PAGE	:	1	OF		21		
(ch	(check only one)									
2	X 11a	11b		11c		11	d			
	12	13a		13b		14			15	

		Statements may not be sold or used by any per ename and address of any political committee	
	NAME OF COMMITTEE (In Full) Henry Lawrence for Congress		
Α.	Full Name (Last, First, Middle Initial) Mr. Edward Muransky Mailing Address 7629 Market Street, Suite 200		Date of Receipt 09 12 2014
	City Youngstown	State Zip Code OH 44512	Transaction ID : SA11AI.4422
	FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
	Name of Employer Retired	Occupation Retired	1000.00
	Receipt For: 2014 Primary General Other (specify)	Election Cycle-to-Date	
В.	Full Name (Last, First, Middle Initial) Martin Rafferty Mailing Address 922 82 Street, NW		Date of Receipt
	City	State Zip Code	09 17 2014
	Bradenton	FL 34209	Transaction ID : SA11AI.4482
	FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
	Name of Employer	Occupation	100.00
	Manatee County, Florida	Supervisor	-
	Receipt For: 2014 Primary General Other (specify)	Election Cycle-to-Date 400.00	
_	Full Name (Last, First, Middle Initial) Ronald Rogers		Date of Receipt
C.	Mailing Address P.O. Box 547683		08 22 2014
	City Orlando	State Zip Code FL 32854	Transaction ID : SA11AI.4379
	FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
	Name of Employer Retired	Occupation Retired	250.00
	Receipt For: 2014	Election Cycle-to-Date	
	Primary General Other (specify)	250.00	
Г	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number of		1350.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE	NUMBER:	PAGE	8	OF	21			
(check only one)								
X _{11a}	11b	11c	11	d				
12	13a	13b	14	. [15			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full) Henry Lawrence for Congress Full Name (Last, First, Middle Initial) Robert Smith Date of Receipt Mailing Address 1701 4th Avenue, West 2014 17 City State Zip Code Transaction ID: SA11AI.4479 FL 34221 Palmetto FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 500.00 Name of Employer Occupation **Bail Bonds** Self-employed Receipt For: 2014 Election Cycle-to-Date Primary X General 500.00 Other (specify) Full Name (Last, First, Middle Initial) Mr. Robert Storey Jr. Date of Receipt Mailing Address 20580 Pezzana Drive 26 2014 City State Zip Code Transaction ID: SA11AI.4510 Venice FL 34292 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 1000.00 Name of Employer Occupation Retired Retired Receipt For: 2014 Election Cycle-to-Date M General Primary 1000.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Receipt For: Election Cycle-to-Date Primary General Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional)..... 5400.00 TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

	FOF	R LINE	NU	MBER:	PAGE		9 (OF_	_2	21
Use separate schedule(s)	(che	ck only	or or	ne)						
for each category of the		11a		11b	11c	X	11d			
Detailed Summary Page		12		13a	13b		14		<u>l</u>	15

Ar or	ny information copied from such Reports and S for commercial purposes, other than using the	tatements may not be sold or used by any per name and address of any political committee	rson for the purpose of soliciting contributions
\rangle	NAME OF COMMITTEE (In Full) Henry Lawrence for Congress		
Full Name (Last, First, Middle Initial) Henry Lawrence Mailing Address 2110 2nd Avenue, East			Date of Receipt 08 07 2014
	City Palmetto	State Zip Code FL 34221	Transaction ID : SA11D.4395
	FEC ID number of contributing federal political committee.	C H4FL16146	Amount of Each Receipt this Period
	Name of Employer Self-employed	Occupation Self-employed	25.00
	Receipt For: 2014 Primary General Other (specify)	Election Cycle-to-Date 10725.00	
3.	Full Name (Last, First, Middle Initial)		Date of Receipt
-	Mailing Address City	M M / D D / Y Y Y Y	
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
	Name of Employer	Occupation	,
	Receipt For: Primary General Other (specify)	Election Cycle-to-Date	
	Full Name (Last, First, Middle Initial)		Date of Receipt
j.	Mailing Address		M = M / D = D / Y = Y = Y
	City	State Zip Code	
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
	Name of Employer	Occupation	,
	Receipt For: Primary General Other (specify)	Election Cycle-to-Date	
S	SUBTOTAL of Receipts This Page (optional)		25.00
Т	OTAL This Period (last page this line number o	nly)	25.00

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SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use separate sch for each category Detailed Summar	edule(s) of the	FOR LINE NUMBER: PAGE 10 OF 21 (check only one) X 17
Any information copied from such Reports and Statements r or for commercial purposes, other than using the name and			
NAME OF COMMITTEE (In Full) Henry Lawrence for Congress	, , , , , , , , , , , , , , , , , , ,		
Full Name (Last, First, Middle Initial) A. Authorize.Net			Date of Disbursement
Mailing Address P.O.Box 8999	08 07 2014		
City State San Francisco CA	Zip Code 98128		Amount of Each Disbursement this Period
Purpose of Disbursement Service charge		001	95.81 Transaction ID : SB17.4401
Candidate Name Henry Lawrence for Congress	Henry Lawrence for Congress		
Office Sought: House Disbursement Formary			
Full Name (Last, First, Middle Initial) Authorize.Net Mailing Address P.O.Box 8999 City State San Francisco CA Purpose of Disbursement Service charge Candidate Name Henry Lawrence for Congress	Zip Code 98128	001 Category/ Type	Date of Disbursement M M O O O O O O O O O O O O O O O O O
Office Sought: House Disbursement Formary			
Full Name (Last, First, Middle Initial) Daphne Boyd Mailing Address 313 62nd Street			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State Z	Zip Code 34218	004	Amount of Each Disbursement this Period 300.00
Candidate Name Henry Lawrence for Congress Office Sought: House Disbursement Formula		O01 Category/ Type	Transaction ID : SB17.4440
State: FL District: 16	(CPCONY)		

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

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	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS		Use separate sch for each category Detailed Summar	of the	FOR LINE NUMBER: PAGE 11 OF 21 (check only one) X 17
					person for the purpose of soliciting contributions ee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Henry Lawrence for Congress	3			
Α.	Full Name (Last, First, Middle Initial) City of Palmetto				Date of Disbursement
Mailing Address 516 8th Avenue, West					08 07 2014
	City Palmetto	State FL	Zip Code 34221		Amount of Each Disbursement this Period
	Purpose of Disbursement Water bill			001	178.12 Transaction ID : SB17.4365
	Candidate Name Henry Lawrence for Congress			Category/ Type	
	Senate President	sbursement For Primary Other (s	X General		
_	State: FL District: 16 Full Name (Last, First, Middle Initial)				
В.					Date of Disbursement
	Mailing Address 2344 12th Street	09 16 2014			
	City Sarasota	State FL	Zip Code 34237		Amount of Each Disbursement this Period
	Purpose of Disbursement Electricity bill			001	73.57 Transaction ID : SB17.4435
	Candidate Name Henry Lawrence for Congres			Category/ Type	
	Senate President	sbursement For Primary Other (s	X General		
	State: FL District: 16 Full Name (Last, First, Middle Initial)				
C.	NationBuilder				Date of Disbursement
	Mailing Address 448 South Hill Street, Suite	08 11 2014			
	City San Francisco	Amount of Each Disbursement this Period			
	Purpose of Disbursement Service charge	001	78.00		
	Candidate Name Henry Lawrence for Congress	Category/ Type	Transaction ID : SB17.4369		
	Office Sought: House Di Senate President	sbursement For Primary Other (s	X General		
	State: FL District: 16	_			

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use separate sche for each category Detailed Summary	edule(s) (d of the	OR LINE NUMBER: PAGE 12 OF 21 check only one) X 17
Any information copied from such Reports and Statements or for commercial purposes, other than using the name ar			erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Henry Lawrence for Congress	,.		
Full Name (Last, First, Middle Initial) A. NationBuilder			Date of Disbursement
Mailing Address 448 South Hill Street, Suite 200			09 11 2014
City State San Francisco CA	Zip Code 90013		Amount of Each Disbursement this Period
Purpose of Disbursement Service charge		001	78.00 Transaction ID : SB17.4428
Candidate Name Henry Lawrence for Congress		Category/ Type	
Office Sought: House Disbursement			
Full Name (Last, First, Middle Initial) Oriental Village Restaurant, Inc. Mailing Address 2907 27th Avenue, West City State Bradenton FL Purpose of Disbursement Rent Candidate Name Henry Lawrence for Congress Office Sought: House Senate Prime Othe	_*	001 Category/ Type	Date of Disbursement M M M / D D / Y Y Y Y Amount of Each Disbursement this Period 1000.00 Transaction ID: SB17.4444
State: FL District: 16 Full Name (Last, First, Middle Initial)	(Specify)		
Sarasota Herald Tribune Mailing Address 1741 Main Street			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State Sarasota FL	Zip Code 34236		Amount of Each Disbursement this Period
Purpose of Disbursement Digital Media Candidate Name Henry Lawrence for Congress Office Sought: House Senate Prim.		004 Category/ Type	1000.00 Transaction ID : SB17.4527
	r (specify)		

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

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S	CHEDULE B (FEC Form 3)	I I			INE NUME	ER:	PAGE	13 (OF 21	
	EMIZED DISBURSEMENTS	Use separate sci			only one)					
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Δr	by information copied from such Reports and Statements r	may not be cold or used by any					olicitin			
	for commercial purposes, other than using the name and									
	NAME OF COMMITTEE (In Full)									
\rangle	Henry Lawrence for Congress									
	Full Name (Last, First, Middle Initial)									
A.	Sarasota Herald Tribune				ate of Dist	oursement				
	Mailing Address 1741 Main Street					29	/ Y	2014	Y	
	City State Zip Code					ach Disb	urseme	ent this	Period	
	Sarasota FL	34236								
	Purpose of Disbursement Digital media		004	1 I L			,	500	.00	
			004	Tra	nsaction II) : SB17.4	1528			
	Candidate Name Henry Lawrence for Congress		Category/ Type							
	Office Sought:	or: 2014	Турс							
	Senate Primary	/ General								
		specify)								
_	State: FL District: 16									
	Full Name (Last, First, Middle Initial) Sarasota Herald Tribune									
В.						oursement			_	
	Mailing Address 1741 Main Street				09 / 30 / Y Y Y Y Y 2014					
	City State	Zip Code		A	mount of E	ach Disb	urseme	ent this	Period	
	Sarasota FL	34236		_ г				500		
	Purpose of Disbursement Digital media	004				0.00				
	Candidate Name	Category/ Type	'							
	Office Sought: House Disbursement Fo	pr: 2014	1,700							
	Senate Primary	/ General								
	President Other (specify)								
	State: District:									
	Full Name (Last, First, Middle Initial)				ate of Dist					
C.	Montie Suarez				ate of Dist	oursement			_	
	Mailing Address 5722 Olive Avenue				м м /	D D 07	Y	^y ^y 2014	Y	
	City State Z		A	mount of E	ach Disb	urseme	ent this	Period		
		34231			-		-	-	-	
	Purpose of Disbursement Consulting fee 001					400.00				
	Candidata Nama					Transaction ID : SB17.4363				
	Henry Lawrence for Congress	Category/ Type								
	Office Sought:	1 71.								
	Senate Primary									
	President Other (specify)								

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

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SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use separate so for each categor	y of the	FOR LINE NUMBER: PAGE 14 OF 21 (check only one)
	Detailed Summa	ry Page	20a 20b 20c 21
Any information copied from such Reports and Statemer or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) Henry Lawrence for Congress			
Full Name (Last, First, Middle Initial) A. Montie Suarez			Date of Disbursement
Mailing Address 5722 Olive Avenue			09 16 2014
City Sta	'		Amount of Each Disbursement this Period
Sarasota FL Purpose of Disbursement	34231		300.00
Consulting fees		001	Transaction ID : SB17.4429
Candidate Name Henry Lawrence for Congress		Category/ Type	
	nt For: imary General ther (specify)		
State: FL District: 16			
Full Name (Last, First, Middle Initial) Tropical Refrigeration Mailing Address 4612 26th Avenue, West			Date of Disbursement 09 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Sta	ite Zip Code		
Bradenton FI	•		Amount of Each Disbursement this Period
Purpose of Disbursement Air conditioning repair		001	750.00 Transaction ID : SB17.4443
Candidate Name Henry Lawrence for Congress		Category/ Type	
Senate Pr	nt For: 2014 imary X General ther (specify)		
Full Name (Last, First, Middle Initial)			
C. Universal Business Systems			Date of Disbursement
Mailing Address 5326 West Crenshaw Street			09
City State	Zip Code		Amount of Each Disbursement this Period
Tampa FL Purpose of Disbursement Envelope printing	33634		369.01
Candidate Name		Category/	Transaction ID : SB17.4427
Henry Lawrence for Congress		Type	
Senate Pr	nt For: 2014 imary		
State: FI District: 16	· /= //		

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS		Use separate sch for each category Detailed Summar	of the	FOR LINE NUMBER: PAGE 15 OF 21 (check only one) X	
					person for the purpose of soliciting contributions ee to solicit contributions from such committee.	
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) Henry Lawrence for Congress					
Full Name (Last, First, Middle Initial) A. Universal Business Systems					Date of Disbursement	
	Mailing Address 5326 West Crenshaw Street				09 23 2014 Amount of Each Disbursement this Period	
	City Tampa	State FL	Zip Code 33634			
	Purpose of Disbursement 4X4 campaign signs			001	1391.00 Transaction ID : SB17.4441	
	Candidate Name Henry Lawrence for Congress			Category/ Type		
	Office Sought: House Senate President	Oursement For Primary Other (s	X General	71.		
_	State: FL District: 16 Full Name (Last, First, Middle Initial)					
3.	Mailing Address				Date of Disbursement	
City State Zip Code						
	•	State	Zip Code		Amount of Each Disbursement this Period	
Purpose of Disbursement						
	Candidate Name			Category/ Type		
	Office Sought: House Dist Senate President	oursement For Primary Other (s	General			
	State: District:					
Э.	Full Name (Last, First, Middle Initial)				Date of Disbursement	
	Mailing Address				M M / D D / Y Y Y	
	City	State Zi	p Code		Amount of Each Disbursement this Period	
Purpose of Disbursement Candidate Name Category/ Type						
	Office Sought: House Dist Senate President	oursement For Primary Other (s	General			
	State: District:					
					1391.00	

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

Use separate schedule(s) for each category of the

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Detailed Summary Page Transaction ID: SC/10.4146 NAME OF COMMITTEE (In Full) Henry Lawrence for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Henry Lawrence General Mailing Address Other (specify) 2110 2nd Avenue, East State ZIP Code City FL 34221 Palmetto Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 10000.00 0.00 10000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 01 ^M 05^M ž014 5/1/2015 5.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 10000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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Detailed Summary Page Transaction ID: SC/10.4165 NAME OF COMMITTEE (In Full) Henry Lawrence for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Henry Lawrence General Mailing Address Other (specify) 2110 2nd Avenue, East State ZIP Code City FL 34221 Palmetto Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 1000.00 0.00 1000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 04 ^M 06^M ž014 5/1/2014 5.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 1000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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Detailed Summary Page Transaction ID: SC/10.4276 NAME OF COMMITTEE (In Full) Henry Lawrence for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Henry Lawrence General Mailing Address Other (specify) 2110 2nd Avenue, East State ZIP Code City FL 34221 Palmetto Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 10000.00 0.00 10000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 01 ^M 07^M ž014 5.00 11/30/14 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 10000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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Detailed Summary Page Transaction ID: SC/10.4337 NAME OF COMMITTEE (In Full) Henry Lawrence for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Primary Henry Lawrence ★ General Mailing Address Other (specify) 2110 2nd Avenue, East City State ZIP Code FL 34221 Palmetto Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 700.00 0.00 700.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M08^M 06 ž014 11/30/2014 5.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 700.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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OANS		Detailed Summary Page	(check only one) 13a
AME OF COMMITTEE (In Full)		Transactio	n ID : SC/10.4172
Henry Lawrence for Congres	SS		
LOAN SOURCE Full Name (Last, Geneva Presha	First, Middle Initial)	E	Election: 2014 Primary
Mailing Address			✓ GeneralOther (specify) ▼
2110 2nd Avenue, East			
City	State ZIP C	Code	
Palmetto	FL 3422	<u> </u>	
Original Amount of Loan	Cumulative Payment 1	To Date Balance	e Outstanding at Close of This Period
2500	.00	0.00	2500.00
Date Incurred M 06 / D 06 / Y 2014	Date Du	e Interest Rate 7 5/1/2015 5.00	Secured:
List All Endorsers or Guarantors	(if any) to Loan Source		Yes No
Full Name (Last, First, Middle In	· · · · · · · · · · · · · · · · · · ·	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	
2. Full Name (Last, First, Middle In	itial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	
3. Full Name (Last, First, Middle In	tial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	
4. Full Name (Last, First, Middle In	itial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	
SUBTOTALS This Period This Page (o	optional)	······	2500.00
TOTALS This Period (last page in this	line only)		9 9
Carry outstanding balance only to LIN	NE 3. Schedule D. for this line. I	If no Schedule D. carry forwar	d to appropriate line of Summary.

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DANS		Detailed Summary Pa	
AME OF COMMITTEE (In Full)		Transa	action ID : SC/10.4324
Henry Lawrence for Cong	ress		
LOAN SOURCE Full Name (La	st, First, Middle Initial)		Election: 2014
Geneva Presha			Primary General
Mailing Address 2110 2nd Avenue, East			Other (specify)
City	State	ZIP Code	
Palmetto	FL	34221	
Original Amount of Loan	Cumulative Pa	ayment To Date Bal	lance Outstanding at Close of This Period
, , , , 1	200.00	0.00	1200.00
TERMS Date Incurred		Date Due Interest Ra	te Secured:
^M 07 ^M / ^D 05 ^D / Y Ž07		⁷ 11/30/2014 5.0	
List All Endorsers or Guaranto	rs (if any) to Loan Source	;	165 110
1. Full Name (Last, First, Middl	e Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	7
2. Full Name (Last, First, Middle	Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	7
3. Full Name (Last, First, Middle	Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	7 7 7
4. Full Name (Last, First, Middle	Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	9 1 9 1 2
SUBTOTALS This Period This Pag	e (optional)	>	1200.00
OTALS This Period (last page in	this line only)		25400.00
Carry outstanding balance only to	LINE 3. Schedule D. for th	is line. If no Schedule D. carry for	ward to appropriate line of Summary.